



This is an official **DHEC Health Alert**

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Pertussis Exposure in the Pickens County Health Department

Summary

Clients at the WIC Clinic in the Pickens County Health Department may have been exposed to pertussis. DHEC is working to reach all persons that could have been exposed. While the exposure is thought to be minimal, we want to make sure that healthcare providers in the area are aware of the situation.

Neither individuals with previous pertussis infection nor those vaccinated have absolute immunity; these individuals can, therefore, become infected. Older children and adults with mild illness can transmit the infection and are often the source of illness in infants. Therefore, early recognition and treatment of pertussis and prophylaxis of the household members and those who had significant close contact are especially important.

DHEC staff will evaluate those individuals who may have been exposed in the WIC clinic, and will refer WIC clients who are determined to be at high risk for exposure and/or complications from pertussis to their primary care providers to receive post-exposure prophylaxis. Pertussis containing vaccines are available from a number of community vaccine providers including DHEC clinics.

Guidance for Clinicians

Symptoms

Infants may present with apnea and/or cyanosis.

In adolescents and adults, pertussis is often misdiagnosed as asthma or bronchitis. Patients reporting prolonged coughing spells, with shortness of breath, choking sensations, episodes of paroxysmal or spasmodic cough, whoop after cough, and post-tussive syncope or emesis should be evaluated for pertussis.

Testing

If you clinically suspect pertussis, consider collection and submission of specimens for laboratory confirmation. The preferred laboratory test for confirmation of pertussis is isolation of *Bordetella pertussis* by culture and Polymerase Chain Reaction (PCR) testing. The organism is more likely to be found early in the coughing phase. After 3-4 weeks into the disease or once antimicrobial treatment has begun, the organism may have cleared the nasopharyngeal area; hence, cultures may be negative.

Both PCR and culture are considered confirmatory in the presence of a clinically compatible illness. Testing can be performed on symptomatic individuals by a local hospital, a reference laboratory or the DHEC Bureau of Labs by contacting your local county health department.

Treatment

Azithromycin for 5 days is the American Academy of Pediatrics recommended treatment of choice for both suspect cases and asymptomatic contacts. If this drug is not tolerated, clarithromycin, erythromycin, or trimethoprim sulfamethoxazole may be substituted.

Symptomatic children and/or adults may return to school, childcare, or work after completing the first 5 days of medication. Exposed persons without cough illness do not require exclusion from school, childcare, or work.

Antibiotic Prophylaxis for Close Contacts, Especially Those at High Risk

Even fully vaccinated persons may be able to contract/spread pertussis, so antimicrobial prophylaxis of contacts, administered within 21 days of exposure, is critical to reducing transmission. **The CDC supports post-exposure prophylaxis (PEP) of all household contacts to cases, as well as for persons at risk for severe pertussis.** These include:

- Infants under 12 months of age
- Women in their third trimester of pregnancy
- All persons with pre-existing health conditions that may be exacerbated by a pertussis infection (for example, but not limited to, immunocompromised persons and patients with moderate to severe medically treated asthma).

Post-exposure prophylaxis is also recommended for contacts who themselves have close contact with either infants under 12 months, pregnant women or individuals with pre-existing health conditions at risk of severe illness or complications.

PEP is provided regardless of age or vaccination status.

Immunization Recommendations

Close contacts who are unimmunized or underimmunized should have pertussis immunization initiated or continued using age-appropriate products according to the recommended schedule as soon as possible; this includes use of Tdap in children 7 through 10 years of age who did not complete the DTaP series.

A single dose of Tdap is routinely recommended for all persons 11 years of age and older. Patients 10 years of age and older may receive a single dose of Tdap regardless of interval since last tetanus or diphtheria toxoid-containing vaccine.

In addition, the American Academy of Pediatrics recommends that when pertussis is prevalent in a community:

- DTaP immunization can be started as early as 6 weeks of age.
- Doses 2 and 3 in the primary DTaP series can be given at intervals as short as 4 weeks.
- The fourth dose may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.

Reporting Cases in the Upstate Region

Pertussis is reportable within 24 hours of identification of a case or suspect case. Call Upstate Region Epi Staff with your questions, or to report a known or suspected pertussis case.

Additional Resources:

CDC Pertussis Information: <http://www.cdc.gov/pertussis/about/index.html>

American Academy of Pediatrics: <http://www2.aap.org/immunization/illnesses/dtp/pertussis.html>

DHEC contact information for reportable diseases and reporting requirements

Reporting of pertussis is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2014 List of Reportable Conditions available at:

<http://www.scdhec.gov/Library/CR-009025.pdf>

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

Regional Public Health Offices – 2014

Mail or call reports to the Epidemiology Office in each Public Health Region.

LOW COUNTRY PUBLIC HEALTH REGION

Berkeley, Charleston, Dorchester
4050 Bridge View Drive, Suite 600
N. Charleston, SC 29405
Phone: (843) 953-0043
Fax: (843) 953-0051
Nights / Weekends: (843) 441-1091

Beaufort, Colleton, Hampton, Jasper
219 S. Lemacks Street
Walterboro, SC 29488
Phone: (843) 549-1516
Fax: (843) 549-6845
Nights / Weekends: (843) 441-1091

Allendale, Bamberg, Calhoun, Orangeburg
932 Holly Street
Holly Hill, SC 29059
Phone: (803) 300-2270
Fax: (843) 549-6845
Nights / Weekends: (843) 441-1091

MIDLANDS PUBLIC HEALTH REGION

Kershaw, Lexington, Newberry, Richland
2000 Hampton Street
Columbia, SC 29204
Phone: (803) 576-2749
Fax: (803) 576-2993
Nights / Weekends: (888) 801-1046

Chester, Fairfield, Lancaster, York
PO Box 817
1833 Pageland Highway
Lancaster, SC 29720
Phone: (803) 286-9948
Fax: (803) 286-5418
Nights / Weekends: (888) 801-1046

Aiken, Barnwell, Edgefield, Saluda
222 Beaufort Street, NE
Aiken, SC 29801
Phone: (803) 642-1618
Fax: (803) 643-8386
Nights / Weekends: (888) 801-1046

PEE DEE PUBLIC HEALTH REGION

Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion
145 E. Cheves Street
Florence, SC 29506
Phone: (843) 661-4830
Fax: (843) 661-4859
Nights / Weekends: (843) 915-8845

Clarendon, Lee, Sumter
PO Box 1628
105 North Magnolia Street
Sumter, SC 29150
Phone: (803) 773-5511
Fax: (803) 775-9941
Nights/Weekends: (843) 915-8845

Georgetown, Horry, Williamsburg
1931 Industrial Park Road
Conway, SC 29526-5482
Phone: (843) 915-8804
Fax: (843) 915-6502
Nights/Weekends: (843) 915-8845

UPSTATE PUBLIC HEALTH REGION

Anderson, Oconee
220 McGee Road
Anderson, SC 29625
Phone: (864) 260-5801
Fax: (864) 260-5623
Nights / Weekends: (866) 298-4442

Abbeville, Greenwood, Laurens, McCormick
1736 S. Main Street
Greenwood, SC 29646
Phone: (864) 227-5947
Fax: (864) 953-6313
Nights / Weekends: (866) 298-4442

Cherokee, Greenville, Pickens
PO Box 2507
200 University Ridge
Greenville, SC 29602-2507
Phone: (864) 372-3133
Fax: (864) 282-4373
Nights / Weekends: (866) 298-4442

UPSTATE PUBLIC HEALTH REGION (continued)

Spartanburg, Union
PO Box 2507
200 University Ridge
Greenville, SC 29602-2507
Phone: (864) 372-3133
Fax: (864) 282-4373
Nights / Weekends: (866) 298-4442

DHEC Bureau of Disease Control Division of Acute Disease Epidemiology

1751 Calhoun Street
Box 101106
Columbia, SC 29211
Phone: (803) 898-0861
Fax: (803) 898-0897
Nights / Weekends: 1-888-847-0902



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